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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number 10/680,630		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY										OR	OTHER THAN OR SMALL ENTITY	
FOR NUMBER FILED				NUMBER EXTRA			RATE	FEE		RATE	FEE	
BASIC FEE (37 CFR 1.16(a))									\$ <u></u>	- CR		\$
TOTAL CLAIMS (37 CFR 1.16(c))				minus 20 =			1	× 5 •		<b>CR</b>	x 8•	
MD	PENDENT CLAU	u.s		manus 3		•		× 5		OR	x 8 °	
MULTIPLE DEPENDENT CLASS PRESENT (37 CFR 1.16(4))							1	+4=		CR	+5=	
if the difference in column 1 is less than zero, enter "O" in column 2.							•	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II												
	(Column 1) (Column 2) (Column 3)						_	SMALL E	NTITY	OR	OTHER THAN SMALL ENTITY	
ENDMENT A		CLAIM REMAIN AFTE AMENON	ING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (以びA 1.1版)	27		Mimus	<sup>-</sup> 21	<b>*</b> 6		x s=		OR	x:18 -	108
	Independent (SF CFR 1.16(d))	· 6		Minus	3	* 3		x \$=		OR	x \$ 86_=	258
AM	FIRST PRESENTATION OF MILETIPLE DEPENDENT CLAIM (37 CFR 1.18(4))							+3		OR	+5_=	
								TOTAL ADOL FEE		QR	TOTAL ADD'L FEE	366
8	16.04	(Catumo	1)		(Column 2)	(Column 3)						
AMENDMENT B		CLAIM REMAIN AFTEI AMENDM	NG		NIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL SEE		RATE	ADDI- TIONAL FEE
	Total 87 OFR 1,4RdS	27		Minus	27	•		x :		OR	x \$*	
	Independent (37 GFR 1,18(s))	. 6		Minus	<del>-</del> 6	)		×8=		08	× 5 •	
₹	FIRST PRESENTATION OF MILETIPLE DEPENDENT CLAIM (37 CFR 1.16(4))							+1=		OR	+5=	
(Column 2) (Column 3)								ADD'L FEE		OR	ADD'L FEE	
MENDMENT C	. 1	CLAIM REMAIN AFTER	NG		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total DFCFR 1.Http	AMENDM	ENT	Minus	PAID FOR	- /		x 5=	FEE1	OR	x s =	FEE
	Independent OF CFR 1.18(b)	. 60	$\neg$	Minus		-/-		x s		98	X 6	/
AM	FIRST PRESENTATION OF MILATIPLE DEPENDENT CLAUSE (ST CFR 1.166))							+ 6 =		OR	+: :	7
_						·	, (	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	/
•	' It the "Highest I ' If the "Highest I	Number Pre- tumber Pre-	ricutly icustly	Paid For Paid For	y in column 2, write IN THIS SPACE I IN THIS SPACE I Total or Independe	is less Than 20, s less than 3, c	enti otor	н 20°. Эг.	the approprist		•	l

If the "Righast Number Previously Paid For" (Total to independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The Information is required to obtain or relatin a benefit by the public which is to till user to the process) an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.18. This collection is extincted to take 12 minutes to complete including pathering, preparing, and submitting the completed application form to the USPTO. Three Vidending to depending upon the individual case. Any comments on the amount of time you require to complete this form ander suggestions for reducing this burrier, should be sent to the Chief Information Orice, U.S. Patent and Tademanh. Office, U.S. Dependent of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THAS ADDRESS. SEMD TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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